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PTO/SB/05 (03-01)  
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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 42390P11927

First Inventor or Application Identifier Sriram Vajapeyam

Title DEPENDENCE-CHAIN PROCESSOR

Express Mail Label No. EL65184444US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification Total Pages   
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets
5. Oath or Declaration Total Pages 
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76.

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CFR)
  - b. ☐ Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ Paper
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO - 1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 USC 122(b)(2)(B)(i).  
Applicant must attach form PTO/SB/35 or its equivalent
17. ☐ Other: .....

## 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_/\_\_\_\_\_

Prior application Information: Examiner \_\_\_\_\_

Group/Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

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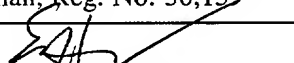
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|  |  |   |  |
|--|--|---|--|
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2002</h2> <p style="font-size: small; margin: 5px 0;"><i>Patent fees are subject to annual revision.</i></p> |  | <b>Complete if Known</b>  |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1044.00  |  | Application Number<br>Filing Date<br>First Named Inventor: Sriram Vajapeyam, et al.<br>Examiner Name<br>Group Art Unit<br>Attorney Docket Number: 42390P11927 |  |

| METHOD OF PAYMENT (check one)  | FEE CALCULATION (continued)   |                 |                 |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
|--|---|-----------------|-----------------|--|-----------------|-----------------|----------|-----|-----|-----|--------------------|-------------------------------------|-----|-----|-----|-----|-------------------|--|-----|-----|-----|-----|------------------|---------------------------|-----|-----|-------|-----|--------------------|--|-----|-----|-----|-----|------------------------|--|--------------------------|-----|-------|-----|-------|---|--------------|--------------|----------------|----------|----|---|-------------|--------|-----|----------|-------------|--|--------------------|-----|-----|-----|----------|---|----------------|-----------------|-----------------|----------|-----|--|-----|-----|------------------------|-----|-----|---|-----|-----|-----------------------------------|-----|-----|------------------|-----|-----|--------------------------|-----|-----|--|-----|-----|---|-----|-----|--------------------------|-----|-----|---|-----|--------------------------|---|--|-----|-----|--------|----|----------------------------------|--|-----|-------|-----|-----|--------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|----|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------------|--|--|--|--|--|--------------------------------|--|--|--|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: 02-2666</p> <p>Deposit Account Name: Blakely, Sokoloff, Taylor &amp; Zafman LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>   | <p>3. <b>ADDITIONAL FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920</td><td>112</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840</td><td>113</td><td>1,840</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for response within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for response within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for response within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for response within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for response within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidably</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentionally</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40</td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"> <b>SUBTOTAL (3) (\$)</b> 40.00                 </td> </tr> </tbody> </table> | Large Fee Code  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description | Fee Paid | 105 | 130 | 205 | 65                 | Surcharge - late filing fee or oath |     | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet |     | 139 | 130 | 139 | 130              | Non-English specification |     | 147 | 2,520 | 147 | 2,520              | For filing a request for <i>ex parte</i> reexamination |     | 112 | 920 | 112 | 920                    | Requesting publication of SIR prior to Examiner action |                          | 113 | 1,840 | 113 | 1,840 | Requesting publication of SIR after Examiner action |              | 115          | 110            | 215      | 55 | Extension for response within first month |             | 116    | 400 | 216      | 200         | Extension for response within second month |                    | 117 | 920 | 217 | 460      | Extension for response within third month |                | 118             | 1,440           | 218      | 720 | Extension for response within fourth month |     | 128 | 1,960                  | 228 | 980 | Extension for response within fifth month |     | 119 | 320                               | 219 | 160 | Notice of Appeal |     | 120 | 320                      | 220 | 160 | Filing a brief in support of an appeal |     | 121 | 280   | 221 | 140 | Request for oral hearing |     | 138 | 1,510   | 138 | 1,510                    | Petition to institute a public use proceeding |  | 140 | 110 | 240    | 55 | Petition to revive - unavoidably |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentionally |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40 | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | <b>SUBTOTAL (3) (\$)</b> 40.00 |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 105  | 130   | 205             | 65              | Surcharge - late filing fee or oath  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 127  | 50  | 227             | 25              | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 139  | 130   | 139             | 130             | Non-English specification  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 147  | 2,520   | 147             | 2,520           | For filing a request for <i>ex parte</i> reexamination                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 112  | 920   | 112             | 920             | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 113  | 1,840   | 113             | 1,840           | Requesting publication of SIR after Examiner action                        |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 115  | 110   | 215             | 55              | Extension for response within first month                                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 116  | 400   | 216             | 200             | Extension for response within second month                                 |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 117  | 920   | 217             | 460             | Extension for response within third month                                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 118  | 1,440   | 218             | 720             | Extension for response within fourth month                                 |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 128  | 1,960   | 228             | 980             | Extension for response within fifth month                                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 119  | 320   | 219             | 160             | Notice of Appeal   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 120  | 320   | 220             | 160             | Filing a brief in support of an appeal                                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 121  | 280   | 221             | 140             | Request for oral hearing   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 138  | 1,510   | 138             | 1,510           | Petition to institute a public use proceeding                              |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 140  | 110   | 240             | 55              | Petition to revive - unavoidably   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 141  | 1,280   | 241             | 640             | Petition to revive - unintentionally                                       |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 142  | 1,280   | 242             | 640             | Utility issue fee (or reissue)   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 143  | 460   | 243             | 230             | Design issue fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 144  | 620   | 244             | 310             | Plant issue fee  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 122  | 130   | 122             | 130             | Petitions to the Commissioner  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 123  | 50  | 123             | 50              | Petitions related to provisional applications                              |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 126  | 180   | 126             | 180             | Submission of Information Disclosure Stmt                                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 581  | 40  | 581             | 40              | Recording each patent assignment per property (times number of properties) | 40              |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 146  | 740   | 246             | 370             | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 149  | 740   | 249             | 370             | For each additional invention to be examined (37 CFR 1.129(b))             |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 179  | 740   | 279             | 370             | Request for Continued Examination (RCE)                                    |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 169  | 900   | 169             | 900             | Request for expedited examination of a design application                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| Other fee (specify) _____  |   |                 |                 |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| <b>SUBTOTAL (3) (\$)</b> 40.00   |   |                 |                 |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| <p><b>FEE CALCULATION</b></p> <p>1. <b>FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td>\$740</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1) (\$)</b></td> <td>740.00</td> </tr> </tbody> </table> <p>2. <b>EXTRA CLAIM FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>30</td> <td>-20** = 10</td> <td>X \$18.00 =</td> <td>180.00</td> </tr> <tr> <td>4</td> <td>-3** = 1</td> <td>X \$84.00 =</td> <td>84.00</td> </tr> <tr> <td colspan="3">Multiple Dependent</td> <td></td> </tr> </tbody> </table> <p>Large Entity Small Entity</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple Dependent claim</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>**Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2) (\$)</b></td> <td>264.00</td> </tr> </tbody> </table> <p><small>**or number of previously paid, if greater, For Reissues, see above</small></p> | Large Fee Code  | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$)  | Fee Description | Fee Paid        | 101      | 740 | 201 | 370 | Utility filing fee | \$740                               | 106 | 330 | 206 | 165 | Design filing fee |  | 107 | 510 | 207 | 255 | Plant filing fee |                           | 108 | 740 | 208   | 370 | Reissue filing fee |  | 114 | 160 | 214 | 80  | Provisional filing fee |  | <b>SUBTOTAL (1) (\$)</b> |     |       |     |       | 740.00  | Total Claims | Extra Claims | Fee from below | Fee Paid | 30 | -20** = 10                                | X \$18.00 = | 180.00 | 4   | -3** = 1 | X \$84.00 = | 84.00                                      | Multiple Dependent |     |     |     | Fee Code | Entity Fee (\$)                           | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid | 103 | 18   | 203 | 9   | Claims in excess of 20 |     | 102 | 84  | 202 | 42  | Independent claims in excess of 3 |     | 104 | 280              | 204 | 140 | Multiple Dependent claim |     | 109 | 84                                     | 209 | 42  | **Reissue independent claims over original patent |     | 110 | 18                       | 210 | 9   | **Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2) (\$)</b> |   |  |     |     | 264.00 |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 101  | 740   | 201             | 370             | Utility filing fee   | \$740           |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 106  | 330   | 206             | 165             | Design filing fee  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 107  | 510   | 207             | 255             | Plant filing fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 108  | 740   | 208             | 370             | Reissue filing fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 114  | 160   | 214             | 80              | Provisional filing fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| <b>SUBTOTAL (1) (\$)</b>   |   |                 |                 |  | 740.00          |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| Total Claims   | Extra Claims  | Fee from below  | Fee Paid        |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 30   | -20** = 10  | X \$18.00 =     | 180.00          |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 4  | -3** = 1  | X \$84.00 =     | 84.00           |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| Multiple Dependent   |   |                 |                 |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 103  | 18  | 203             | 9               | Claims in excess of 20   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 102  | 84  | 202             | 42              | Independent claims in excess of 3  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 104  | 280   | 204             | 140             | Multiple Dependent claim   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 109  | 84  | 209             | 42              | **Reissue independent claims over original patent                          |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| 110  | 18  | 210             | 9               | **Reissue claims in excess of 20 and over original patent                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |
| <b>SUBTOTAL (2) (\$)</b>   |   |                 |                 |  | 264.00          |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |     |     |                        |  |                          |     |       |     |       |   |              |              |                |          |    |   |             |        |     |          |             |  |                    |     |     |     |          |   |                |                 |                 |          |     |  |     |     |                        |     |     |   |     |     |                                   |     |     |                  |     |     |                          |     |     |  |     |     |   |     |     |                          |     |     |   |     |                          |   |  |     |     |        |    |                                  |  |     |       |     |     |                                      |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |                                |  |  |  |  |

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|-----------------------|---|------|----------|--------------------------|---------|
| Typed or Printed Name | Eric S. Hyman, Reg. No. 30,139  |      |          | Reg. Number              |         |
| Signature             |  | Date | 01/03/02 | Deposit Account User ID  | 02-2666 |

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